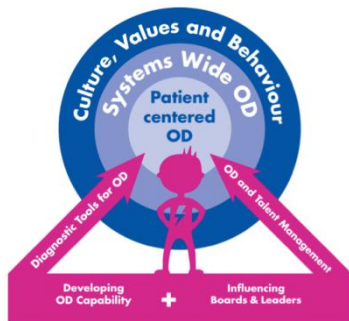


Do OD: Talent Management Workshop Numero Uno June 2014

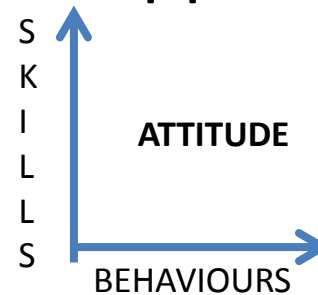


Premiered at the OD in The
NHS II Conference, 7 July 2014

Do
OD
Organisational
Development
Putting Theory into Practice

So what is TALENT?

- David Beckham – you can see this talent
- Talent is at all levels, not just the top
- Ability, opportunity and the right attitude/behaviours to develop – work at it!
- Unlocking and optimising raw untapped potential
- Resilience
- Knowledge
- Raw capability
- ‘Everyone has it – but it’s unlocking/finding it...and helping individuals see it’



...And TALENT MANAGEMENT?

- Talent – are they ready now?
- Impossible → Possible
- You need support to unlock talent
- Creating the opportunity to ‘do it’ and improve it– stretch!
- Inclusive
- Providing scope to move from potential to actual
- Retain or let go – brave.
- Getting people to believe in themselves
- Not time bound
- Not confined to appraisals
- Formal programme?
- Is it always ‘upward’?



What enables TALENT MANAGEMENT?

- Need to enable managers to spot and recognise potential
- It's about the conversation – get to *know* staff
- Organisational readiness and environment
- Links beyond the organisation – possibilities
- Open mind – challenge your perceptions
- Development and deployment
- Career path – it's about the journey *and* the destination

OD Role in TALENT MANAGEMENT

- To be a TM Champion and catalyst
- Enable and support others
- Connector with line management
- Pull together resources and tools such as coaching, mentoring and development for individuals
- Explore possibilities
- Be aware of organisational needs
- Systematic and planned
- Conversations for all
- Create opportunities, space and systems
- No failure – only feedback
- Challenge – ‘Why not?’



What does TM look like now in the NHS?

Great

- ✓ Good in some places – Undergrads, Postgrads, Professional paths etc.
- ✓ Values based approach being used to support whole TM approach

Not So Great

- ✗ Components present – just not joined up
- ✗ Poor performance not actively managed across the organisation –it is tolerated
- ✗ Talent is managed in silos; team, organisation, region, profession
- ✗ Not good at retaining and identifying
- ✗ Inconsistent and still a mystery to staff
- ✗ What it looks like and what it feels like differs
- ✗ Hierarchical or defined paths
- ✗ Core group of staff (bands 1-4) are ignored – ‘forgotten tribe’
- ✗ Hard to keep the contributors engaged and interested

What should TM look like in the future?

- ✓ Across the full health and social care system – make it easier for people to move across organisations in all sectors
- ✓ Standardisation – shared purpose?
- ✓ Clinical and non-clinical divide has disappeared
- ✓ Develop staff to be leaders, and lead change, regardless of role or environment
- ✓ Everyone's responsibility to manage and develop talent
- ✓ Integrated and inclusive TM to reflect an integrated and inclusive NHS
- ✓ Evolve and develop existing roles to meet increasing/different needs
- ✓ TM is valued – recognition that it enhances/develops individuals and organisation – and that it works
- ✓ We pull rather than push

Questions to Ponder....



Gaps for Do OD to explore and tackle...

- TM and OD needs to be championed and owned by the Board and senior managers
- How does the NHS support Boards/CEOs to understand the importance of TM?
- Amend the perception of TM – a tool to support performance and culture change – link to KPIs and outcomes
- Link OD and TM back to the patient
- Ensure TM takes an inclusive approach
- National HR policies regarding this – the NHS is one employer
- More focus on staff performance, linked to behaviour and values
- How do you rate ‘ambition’?



What can we do?



- Keep it simple and define TM – no jargon
- A focus on values and behaviours – what the patient would see
- What does integrated health care look like? Define this so talent strands can be developed
- What is working well where and why? Share best practice and reduce duplication
- Benchmarking with other organisations and sectors
- Take stock toolkit/checklist to start the conversations
- Real life case studies of TM in the NHS – e.g. the benefit statement of TM – tube map?
- The data can't just sit there – what do we do with it?

Tweet-Ups from the sessions

- @NHSE_DoOD
- @NHSAdamTurner
- @KellyAngusHR
- @KarenDumain1
- @AmandaGrindall
- @mrfazack
- @faithllanelli
- @Echallans
- @jmcatlin
- @jackebones

